## SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

16 X 17a 17b 17c 17d 18
19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial)  MRS. MAUREEN MILLER  Mailing Address 15226 W. ROCKLAND ROAD		Transaction ID : SA17.897671  Date of Receipt  05 14 2012
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	1500.00
Receipt For: 2012  X Primary General Other (specify) ▼	Election Cycle-to-Date ▼  2500.00	
3. Full Name (Last, First, Middle Initial) MR. MICHAEL A. MILLER		Transaction ID : SA17.976306 Date of Receipt
Mailing Address 596 SHATZ DRIVE		05 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City VALPARAISO	State Zip Code IN 46385-8834	CONTRIBUTION
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer INFORMATION REQUESTED PER BEST FFFORTS Receipt For: 2012	Occupation INFORMATION REQUESTED PER BEST FFFORTS Election Cycle-to-Date	250.00
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) DR. MICHAEL J. MILLER		Transaction ID : SA17.958470 Date of Receipt
Mailing Address 13020 KETTLES HILL WALK		05 21 2012
City EVANSVILLE	State Zip Code IN 47725-8250	CONTRIBUTION
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer O.H.A.	Occupation PHYSICIAN	1000.00
Receipt For: 2012  ☐ Primary ☐ General  Other (specify) ▼	Election Cycle-to-Date  1000.00	
Subtotal Of Receipts This Page (optional)		2750.00
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